coach builders who annually manufacture fewer than 10,000 vehicles from this onerous tax

I urge my colleagues to join me in providing this tax relief for small businesses by cosponsoring this legislation.

A DISTINGUISHED CAREER OF ACHIEVEMENT

HON. JAMES A. BARCIA

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 25, 1998

Mr. BARCIA. Mr. Speaker, the quality of health care that people receive is most directly related to the skills and manner of the people providing the care. A kind word, a reassuring look, or a friendly touch can do as much to help speed along a person's recovery as can any medicine. The patients at Bay Medical Center have had the good fortune to have the professional leadership of more than 1,200 employees by Dorothy Watrous, the Vice President of Patient Care, who is retiring after seventeen years of service.

During her time at Bay Medical, Dorothy Watrous has been credited with instituting many successful programs. She implemented Primary Care Nursing and Nursing Career Ladders, which have earned national praise as innovative and effective efforts. Dorothy has worked to provide educational opportunities for employees of the Center. She has also given back to the nursing profession through her work in developing an annual nursing scholarship program through Bay Medical Center for qualified students in the community.

One of the most important actions on her part was to develop a flexible scheduling program that accommodated working mothers. Given the demands that medical staffs face, the ability to deal with the realities of family needs helped to provide a happier staff that could only make patients feel even better about the responsiveness of their care. She also provided strong encouragement to employees to pursue further education and move up to positions of greater responsibility.

Having received both her Bachelor's and Masters of Science degrees in nursing from the University of Michigan, Dorothy Watrous went on to serve within the U.S. Public Health Service. She also has participated in many community service projects, including the Board of Directors for the Bay County Women's Center, and the Allocations Committee of United Way of Bay County. She also is the Vice Chairperson for the Board of Directors for Bay Medical Education, and on Advisory Committees for Bay-Arena Skill Center, Delta College, Saginaw Valley State University, and Great Lakes Junior College. She is an active member of the Bay City Presbyterian Church and Choir, the Saginaw Torch Club, and the Bay YWCA Week Without Violence Committee.

Mr. Speaker, when an individual does so much for her profession and for her community, that person deserves to be lauded. While her day-to-day presence will be missed, her efforts and initiatives will certainly continue to be of benefit to people for years to come. I ask you and all of our colleagues to join me in thanking Dorothy Watrous for her years of dedication, and in wishing her the very best for her retirement and all that lies ahead.

SENDING BEST WISHES TO MARYBETH SCARPONE

HON. MICHAEL PAPPAS

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 25, 1998

Mr. PAPPAS. Mr. Speaker, I am sad to report that Marybeth Scarpone, a staff assistant who serves the residents of New Jersey's twelfth congressional district in my Freehold office, has announced that she is leaving the office. Marybeth has been a joy to have in the office. She has always been cheerful and pleasant. She greets constituents with a bright, happy smile putting them at ease. Her caring nature is evident by the numerous letters of gratitude we receive from constituents whom she has helped.

Marybeth grasped new challenges in her life with enthusiasm and exuberance, from the art competition and the women's forum to the youth council. All have been successful events thanks in part to the efforts of Marybeth. Today, my district office is decorated with the artwork of those students who were runner ups in this year's competition.

Often, Marybeth would go beyond the call of duty and we will not only remember her for her happy, beaming demeanor but for the rash of poison ivy after a beach cleanup and the way she looked after chaperoning the 4–H high school essay contest winners on their trip to D.C.—a day that started at 5:00 a.m.

Once in a while you could catch her spending her lunch hour in our conference room with baskets and gardening gloves, caring for the beautiful plants that brighten up our bay window.

Someone else may one day occupy Marybeth's desk but no one can occupy the place in our hearts that she has found. We will miss her very much and we wish her a future of success and happiness.

IN SUPPORT OF BRAIN INJURY RESEARCH

HON. BILL PASCRELL. JR.

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 25, 1998

Mr. PASCRELL. Mr. Speaker, Traumatic Brain Injury, known as TBI, is the number one killer and cause of disability among young people in the United States. It claims more victims than breast cancer, prostate cancer and AIDS combined, yet it receives little attention from Congress, the media and the medical community.

It is time that Congress demonstrate it's commitment to head injury patients and expand our efforts to treat and cure brain injuries. Each year, more than 2 million Americans are involved in an incident which results in head injury. Approximately 100,000 victims die and 500,000 will require hospitalization.

Traumatic brain injury can strike anyone and leave devastating results. Trauma to the head can result in significant impairment to an individual's physical, psychosocial and cognitive functional abilities. TBI affects the victim's whole family both emotionally and economically and often results in immense medical and rehabilitative expenses. The direct and indirect costs of TBI are \$25 billion per year.

In 1996, Congress passed the Traumatic Brain Injury Act which authorized the NIH to expand research studies and establish innovative programs regarding traumatic brain injury. We must now provide the NIH with sufficient funding so that exciting new research, such as regeneration, can reach the clinical stage and give victims and their families new hope.

I urge my colleagues to support NIH brain injury funding so that we can help save Americans from the devastation of Traumatic Brain Injury.

INTRODUCTION OF LEGISLATION CONCERNING THE CHATTAHOO-CHEE NATIONAL RECREATION AREA

HON. NEWT GINGRICH

OF GEORGIA

IN THE HOUSE OF REPRESENTATIVES Thursday, June 25, 1998

Mr. GINGRICH. Mr. Speaker, today I introduced a bill, H.R. 4141, to modify the boundaries of the Chattahoochee River National Recreation Area to protect the lands, waters, and natural, cultural, and scenic resources along the Chattahoochee River.

Expansion of the Chattahoochee National Recreation Area will provide additional recreation opportunities for citizens, will protect and preserve the endangered Chattahoochee River, and will be accomplished through support and funding from federal, state, local, and private entities.

The Chattahoochee River, ranked as one of the ten most endangered rivers in the country provides the drinking water for the Atlanta metropolitan area and almost half of the population of Georgia. One of the major concerns to our river is the imminent threat of development. Runoff from construction and the overdevelopment of areas surrounding the fortyeight mile stretch of the river north of the city have resulted in pollution silt, and sediment build-ups. This bill authorizes the creation of a greenway buffer between the river and private development to prevent further pollution from continued development, provide flood and erosion control, and maintain water quality for safe drinking water and for the abundant fish and wildlife dependent on the river system. Protecting this valuable resource is vital to the future of the state of Georgia and what I consider to be one of the most important things that I can do in my public career.

The massive influx of people—more than 400,000 since 1990—into the Atlanta metropolitan area has not only endangered the river, but has also dramatically increased the need for recreational areas. The Chattahoochee River is currently one of the most visited recreation areas in the country. At the rate of growth expected in this area, the demand for parks will only increase. Visitor enjoyment will be enhanced by increased acreage and by adding land-based links between exiting units of the national recreation area. This additional land will be welcomed in a city with a lack of public parks and green spaces.

This greenway project will serve as a model for future conservation efforts. Public and private cost sharing will ensure local involvement in the expansion of the park boundary. Federal appropriations provided in this proposal will be matched by funding from the State of

Georgia, local governments, private foundations, corporate entities, private individuals, and other sources. The cost to the federal government will be less than half of the estimated cost of the effort and will almost certainly be much less.

I am very pleased to introduce a proposal that will promote private/public partnerships in protecting vital natural resources and in increasing recreational opportunities for citizens. Expanding the Chattahoochee National Recreation Area will ensure that future generations will have clean water to drink and will be able to enjoy the beauty of this nationally significant resource.

TRIBUTE TO NICK BACA

HON. BOB FILNER

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 25, 1998

Mr. FILNER. Mr. Speaker and colleagues, I rise today to honor a hero and a pillar of our community—Nick Baca, who died in January, 1998 at the age of 76.

Although Nick served honorably in World War II and narrowly escaped death, he rarely spoke of his service and kept the memories buried for many years. In June of 1944, as a Ranger scout with the Second Ranger Battalion, he scaled the cliffs of Pointe du Hoc on the Normandy coast of France to destroy enemy bunkers. He was one of 24 out of 120 who reached the top in a barrage of gunfire and grenades.

He fought in the Battle of the Bulge and was taken prisoner. In December of 1944, he was lined up with his fellow prisoners in a column three men deep to be shot, but miraculously escaped a bullet in the massacre by the German guards. Covered with bodies, Nick lay still so the soldiers with bayonets did not notice him. The man on top of him was stabbed to death by a bayonet and Nick's leg was cut. He hid for several days before making his way back to friendly lines—one of only a handful who survived this massacre of American prisoners of war in Malmedy, Belgium.

After the war, he returned as an Army sergeant to his life in Los Lentes, New Mexico where his family had lived since the 1600s. When jobs became scarce, he became the first of his family to leave this area, and he moved to National City, California. Here he established himself in the construction industry and became a leader in the community. He was especially active in the Veterans of Foreign Wars. He was president of an Hispanic social organization in the 1970s.

His was a wonderful life. He was a man who did his duty to his country, who contributed to his community, and who raised his family well. He is survived by Eloise, his wife of 56 years, and his children, Rosalie Ortega, George Baca, Robert Baca and Herman Baca, who is a prominent Mexican-American activist in San Diego County—along with 18 grand-children and 11 great grandchildren.

My thoughts and prayers go out to his wife and children and to the larger community who was touched by his presence. We will all miss him.

IN SUPPORT OF H.R. 3905, FAIR-NESS IN ASBESTOS COMPENSA-TION ACT OF 1998

HON. JOHN CONYERS, JR.

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 25, 1998

Mr. CONYERS. Mr. Speaker, today I have agreed to cosponsor H.R. 3905, the "Fairness in Asbestos Compensation Act of 1998," legislation originally introduced by Chairman HYDE.

I have done so because litigation over asbestos claims may have reached a crisis point. Hundreds of thousands of American workers who were exposed to asbestos, and who have suffered or are suffering from serious diseases as a result, have to wait for years to have their legitimate claims paid. In some cases, innocent victims are in danger of not receiving any compensation at all, because the liable corporations have protected themselves, or will protest themselves, under the bankruptcy laws.

In 1994, negotiators between labor unions representing the bulk of the asbestos worker victims, on one side, and asbestos manufacturers, on the other side, resulted in a settlement agreement that was designed to alleviate the crisis. This agreement, know as the "Georgine Settlement" after Robert Georgine. President of the Building and Construction Trades Department of the AFL-CIO and the lead negotiator for labor in the settlement talks, would have established an administrative procedure for resolving asbestos claims. The U.S. District Court that oversees much of the federal class-action asbestos litigation approved the settlement as fair and reasonable. Georgine v. Amchem Products, Inc., 157 F.R.D. 246 (E.D. Pa 1994).

Last year, however, in Amchem Products, Inc. v. Windsor, 117 S. Ct. 2231 (1997), the Supreme Court invalidated the Georgine Settlement, not on grounds of unfairness, but because the settlement agreement did not fit within the technical requirements of Rule 23 of the Federal Rules of Civil Procedure, which governs class-action lawsuits. The Court held that the federal courts lacked statutory authority to order so sweeping a settlement. Writing for the Supreme Court majority, Justice Ruth Bader Ginsburg stated: "The argument is sensibly made that a nationwide administrative claims processing regime would provide the most secure, fair, and efficient means of compensating victims of asbestos exposure. Congress, however, has not adopted such a solution.'

Given the Supreme Court's decision, I believe that the relevant parties should again come to the table to work out a legislative solution if at all possible. That is why I have agreed to cosponsor H.R. 3905. I do want to note, however, that I have some specific concerns about the language of the bill as it is currently drafted. I am concerned the bill would eliminate the availability of punitive damages in those cases in which asbestos victims choose to pursue ordinary tort remedies instead of the administrative claims procedure. I have always believed, and I continue to believe strongly, that punitive damages must be available to sanction outrageous wrongdoing by corporate defendants. Otherwise, some unscrupulous businesspeople will simply choose to treat the damage caused by unsafe products as a cost of doing business. This in no way means that I believe those defendants in the Georgine Settlement engaged in such conduct, but I do believe that such judgments should be left to the judicial process.

In addition, it is my position that any legislation we enact in the asbestos area should hew as closely as possible to the terms of the Georgine Settlement. To the extent H.R. 3905 may depart from those terms, I believe we should examine such departures very closely.

I look forward to working with Chairman HYDE on a bipartisan basis on this important legislation.

THE MEDICARE+CHOICE PHARMA-CEUTICAL MANAGEMENT ACT

HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 25, 1998

Mr. STARK. Mr. Speaker, I am pleased to introduce the Medicare+Choice Pharmaceutical Management Act of 1998.

This bill would provide important protections for Medicare beneficiaries receiving prescription drug benefits through Medicare+Choice plans. These plans would be required to disclose important information about how they manage their drug benefits to cut costs, including any incentives offered to doctors to get them to switch to cheaper, but sometimes less effective, medications.

While many health plans still manage their own drug benefits, an increasing number of plans are hiring a new breed of management consultants known as pharmaceutical benefit managers (PBMs) to do their work for them. These companies currently manage prescriptions for some 115 million Americans and the number is expected to reach 200 million by the year 2000.

Plans have turned to PBMs in the hopes that they will be able to cut rising prescription drug costs. PBMs accomplish that goal by setting up lists of approved drugs (known as formularies), requiring specific authorization of non-formulary drugs, and urging doctors—often by providing financial and other incentives—to switch prescriptions for less expensive medications.

Of greater concern is the fact that PBMs are often given free reign to manage benefits through their own programs, with little oversight from the health plan. And, PBMs are neither licensed health care providers nor subject to federal regulation by the Food and Drug Administration (FDA).

Several of the largest PBMs are now owned by drug manufacturers and many independent PBMs have formed "strategic alliances" with drug manufacturers, exchanging preferential treatment on a formulary with millions of dollars in rebate payments from the drug companies. Since 1993, the three largest PBMs, serving fully 80% of covered enrollees, have been acquired by drug manufacturers at a total cost of \$12.8 billion. And, a January 1998 study showed that drug-company-owned PBMs covered 41% of the lives enrolled in PBM programs.

Drug companies that ow PBMs say that they have "firewalls" in place to prohibit the two companies from sharing proprietary information or conducting joint marketing efforts